

Fill in this information to identify your case:

Debtor 1	<u>Timothy</u>	<u>Luke</u>	<u>George</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u></u>	<u></u>	<u></u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Texas</u>		
Case number (if known)	<u></u>		

Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

#### 1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

#### Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim	Value of collateral that supports this claim	Unsecured portion if any
Do not deduct the value of collateral.		

2.1 <u>Mosaic</u> Creditor's Name <u>300 Lakeside Dr 24th Fl</u> Number Street <u>Oakland, CA 94612</u> City State ZIP Code	<b>Describe the property that secures the claim:</b> <u>Solar Panel</u>	\$23,875.30	\$19,000.00	\$4,875.30
<b>As of the date you file, the claim is:</b> Check all that apply.				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
<b>Nature of lien.</b> Check all that apply.				
<input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)				
Last 4 digits of account number <u>8 5 4 8</u>				
Add the dollar value of your entries in Column A on this page. Write that number here: <u>\$23,875.30</u>				

Debtor 1

Timothy      Luke      George  
 First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

**Part 1:****Additional Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A	Column B	Column C
<b>Amount of claim</b> Do not deduct the value of collateral.	<b>Value of collateral that supports this claim</b>	<b>Unsecured portion if any</b>

2.2	<u>Service Mac</u> Creditor's Name <u>PO Box 100077</u>  Number      Street <u>Duluth, GA 30096</u> City            State    ZIP Code	<b>Describe the property that secures the claim:</b> <div style="border: 1px dashed black; padding: 5px; margin-top: 5px;">           5922 Euclid Loop Richmond, TX 77469-2053         </div> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$321,615.00</b>	<b>\$490,070.00</b>	<b>\$0.00</b>
<b>Who owes the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> <b>Check if this claim relates to a community debt</b>		<b>Nature of lien.</b> Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)			
<b>Date debt was incurred</b> <u>10/01/2015</u>		<b>Last 4 digits of account number</b> <u>9_2_2_8</u>			
2.3	<u>Toyota Financial</u> Creditor's Name <u>PO Box 8026</u> Number      Street <u>Cedar Rapids, IA 52409</u> City            State    ZIP Code	<b>Describe the property that secures the claim:</b> <div style="border: 1px dashed black; padding: 5px; margin-top: 5px;">           2022 Toyota Rav 4         </div> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$37,721.85</b>	<b>\$38,000.00</b>	<b>\$0.00</b>
<b>Who owes the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim relates to a community debt</b>		<b>Nature of lien.</b> Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)			
<b>Date debt was incurred</b>		<b>Last 4 digits of account number</b> <u>3_4_3_4</u>			
<b>Add the dollar value of your entries in Column A on this page. Write that number here:</b>			<b>\$359,336.85</b>		

Debtor 1

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Case number (if known) \_\_\_\_\_

**Part 1:****Additional Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

<i>Column A</i>	<i>Column B</i>	<i>Column C</i>
<b>Amount of claim</b> Do not deduct the value of collateral.	<b>Value of collateral that supports this claim</b>	<b>Unsecured portion If any</b>

2.4	<u>Yard Card</u> Creditor's Name <u>Po Box 100114</u>	<b>Describe the property that secures the claim:</b>  <div style="border: 1px dashed black; height: 40px; width: 100%;"></div>	\$6,595.00	\$0.00	\$6,595.00
	Number      Street <u>Columbia, SC 29202</u>	City      State      ZIP Code			
	<p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p>				
	<p><b>Nature of lien.</b> Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset)</p>				
	<p>Last 4 digits of account number <u>1_1_3_0</u></p> <p>Add the dollar value of your entries in Column A on this page. Write that number here: <u>\$6,595.00</u></p> <p>If this is the last page of your form, add the dollar value totals from all pages. Write that number here: <u>\$389,807.15</u></p>				

Fill in this information to identify your case:

Debtor 1	<b>Timothy</b>	Luke	George
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		<b>Southern District of Texas</b>	
Case number (if known)			

Check if this is an amended filing

## Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  
(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	<u>Texas Attorney General's Office</u> Priority Creditor's Name <u>Child Support Division</u> <u>PO Box 12017</u> Number Street <u>Austin, TX 78711-2017</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>unknown</u>	<u>\$1,573.00</u> <u>\$0.00</u>
	<b>Who incurred the debt? Check one.</b> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Type of PRIORITY unsecured claim:</b> <input checked="" type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____		
2.2	<u>The Law Firm of Keith A. Cothroll</u> Priority Creditor's Name <u>Keith A Cothroll</u> <u>8215 Long Point Rd Ste 8</u> Number Street <u>Houston, TX 77055</u> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$2,000.00</u>	<u>\$2,000.00</u> <u>\$0.00</u>
	<b>Who incurred the debt? Check one.</b> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b>	<b>Type of PRIORITY unsecured claim:</b> <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify _____		

Debtor 1

**Timothy**  
First Name

**Luke**  
Middle Name

**George**  
Last Name

Case number (if known) \_\_\_\_\_

**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- Yes.

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.1	<p><b>Department of the Treasury</b> Nonpriority Creditor's Name <b>Bureau of the Fiscal Service</b> <b>PO Box 830794</b> Number Street <b>Birmingham, AL 35283-0794</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>7010</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Small Business Administration Loan</b></p>
4.2	<p><b>Department of the Treasury</b> Nonpriority Creditor's Name <b>Bureau of the Fiscal Service</b> <b>PO Box 830794</b> Number Street <b>Birmingham, AL 35283-0794</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>7804</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>EIDL Loan</b></p>
4.3	<p><b>Discover Personal Loans</b> Nonpriority Creditor's Name <b>PO Box 6103</b> Number Street <b>Carol Stream, IL 60197-6105</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>9569</u></p> <p>When was the debt incurred? <u>12/13/2021</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Credit Card</b></p>

Debtor 1

<b>Timothy</b>	<b>Luke</b>	<b>George</b>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page**

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.4	<b>JP Morgan Chase Card</b> Nonpriority Creditor's Name <b>PO Box 15123</b> Number Street <b>Wilmington, DE 19850</b> City State ZIP Code	Last 4 digits of account number <u>6891</u> When was the debt incurred? <u>12/23/2016</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<u>\$14,700.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.5	<b>KMD Law</b> Nonpriority Creditor's Name <b>55 Waugh 150</b> Number Street <b>Houston, TX 77007</b> City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? <u>2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify	<u>\$5,550.00</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.6	<b>Lightstream</b> Nonpriority Creditor's Name <b>PO Box 117320</b> Number Street <b>Atlanta, GA 30368</b> City State ZIP Code	Last 4 digits of account number <u>6154</u> When was the debt incurred? <u>06/18/2021</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<u>\$32,298.15</u>
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

<u>Timothy</u>	<u>Luke</u>	<u>George</u>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page**

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.7	<p><u>TD/Purchasingpower.com</u> Nonpriority Creditor's Name</p> <hr/> <p>Number      Street</p> <hr/> <p>City              State      ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>1130</u></p> <p>When was the debt incurred? <u>07/01/2021</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Credit Card</b></p>	<b>\$6,595.00</b>
4.8	<p><u>wells fargo</u> Nonpriority Creditor's Name</p> <hr/> <p><u>PO Box 10347</u> Number      Street</p> <hr/> <p><u>Des Moines, IA 50306-0347</u> City              State      ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5861</u></p> <p>When was the debt incurred? <u>07/20/2021</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Credit Card</b></p>	<b>\$6,117.30</b>

Debtor 1

<b>Timothy</b>	<b>Luke</b>	<b>George</b>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		<b>Total claim</b>
<b>Total claims from Part 1</b>	6a. <b>Domestic support obligations</b>	6a. _____ <b>1353.00</b>
	6b. <b>Taxes and certain other debts you owe the government</b>	6b. _____ <b>\$0.00</b>
	6c. <b>Claims for death or personal injury while you were intoxicated</b>	6c. _____ <b>\$0.00</b>
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d. + _____ <b>\$2,000.00</b>
	6e. <b>Total.</b> Add lines 6a through 6d.	6e. _____ <b>3,353.00</b>

		<b>Total claim</b>
<b>Total claims from Part 2</b>	6f. <b>Student loans</b>	6f. _____ <b>\$0.00</b>
	6g. <b>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</b>	6g. _____ <b>\$0.00</b>
	6h. <b>Debts to pension or profit-sharing plans, and other similar debts</b>	6h. _____ <b>\$0.00</b>
	6i. <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i. + _____ <b>\$445,011.24</b>
	6j. <b>Total.</b> Add lines 6f through 6i.	6j. _____ <b>\$445,011.24</b>

Fill in this information to identify your case:

Debtor 1	<u>Timothy</u>	<u>Luke</u>	<u>George</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Texas</u>		
Case number (if known)			

Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- No. Check this box and file this form with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.**

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	<u>Amreit C Ranch LP</u> Name <u>Ferguson, Braswell, Fraser Kubasta</u> <u>Attn John D Fraser</u> <u>2500 Dallas Pkwy 600</u> Number      Street <u>Plano, TX 75093</u> City              State      ZIP Code	Leased Space Personal Guarantee Contract to be REJECTED
2.2	<u>Verizon</u> Name <u>Po Box 489</u> Number      Street <u>Newark, NJ 07101-0489</u> City              State      ZIP Code	Cell Phones Contract to be ASSUMED
2.3	Name  Number      Street  City              State      ZIP Code	
2.4	Name  Number      Street  City              State      ZIP Code	

Fill in this information to identify your case:

Debtor 1	<u>Timothy</u>	<u>Luke</u>	<u>George</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Texas</u>		
Case number (if known)			

Check if this is an amended filing

## Official Form 106H

### Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No  
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No  
 Yes. In which community state or territory did you live? Texas. Fill in the name and current address of that person.  
Baker, Brittany  
Name of your spouse, former spouse, or legal equivalent  
5922 Euclid Loop  
Number Street  
Richmond, TX 77469-2053  
City State ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
3.1	<p>Name  <u>Baker, Brittany</u>  Name  <u>5922 Euclid Loop</u>  Number Street  <u>Richmond, TX 77469-2053</u>  City State ZIP Code</p>	<p>Check all schedules that apply:</p> <p><input checked="" type="checkbox"/> Schedule D, line <u>2.2</u>  <input type="checkbox"/> Schedule E/F, line _____  <input type="checkbox"/> Schedule G, line _____</p>

Fill in this information to identify your case:

Debtor 1	<b>Timothy</b>	<b>Luke</b>	<b>George</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Southern District of Texas</b>		
Case number (if known)			

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

##### 1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	<b>Debtor 1</b>	<b>Debtor 2 or non-filing spouse</b>
<b>Employment status</b>	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not Employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not Employed
<b>Occupation</b>	VP of Sales	Manager
<b>Employer's name</b>	ITI Manufacturing	Ethan Ellie Enterprises Inc
<b>Employer's address</b>	333 Southwestern Blvd Ste 202 Number Street	5922 Euclid Loop Number Street
	Sugar Land TX 77478 City State Zip Code	Richmond TX 77469 City State Zip Code
<b>How long employed there?</b>	3 months	7 years

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	<b>For Debtor 1</b>	<b>For Debtor 2 or non-filing spouse</b>
2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.	2. <u>\$11,830.00</u>	<u>\$1,450.00</u>
3. Estimate and list monthly overtime pay.	3. + <u>\$0.00</u>	+ <u>\$0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. <u>\$11,830.00</u>	<u>\$1,450.00</u>

Debtor 1

<b>Timothy</b>	<b>Luke</b>	<b>George</b>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

	<b>For Debtor 1</b>	<b>For Debtor 2 or non-filing spouse</b>
<b>Copy line 4 here.....</b> →	4.     \$11,830.00	\$1,450.00
<b>5. List all payroll deductions:</b>		
5a. <b>Tax, Medicare, and Social Security deductions</b>	5a.     \$0.00	\$0.00
5b. <b>Mandatory contributions for retirement plans</b>	5b.     \$0.00	\$0.00
5c. <b>Voluntary contributions for retirement plans</b>	5c.     \$0.00	\$0.00
5d. <b>Required repayments of retirement fund loans</b>	5d.     \$0.00	\$0.00
5e. <b>Insurance</b>	5e.     \$0.00	\$0.00
5f. <b>Domestic support obligations</b>	5f.     \$0.00	\$0.00
5g. <b>Union dues</b>	5g.     \$0.00	\$0.00
5h. <b>Other deductions.</b> Specify: _____	5h. + \$0.00	+ \$0.00
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.     \$0.00	\$0.00
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7.     \$11,830.00	\$1,450.00
<b>8. List all other income regularly received:</b>		
8a. <b>Net income from rental property and from operating a business, profession, or farm</b>	8a.     \$0.00	\$0.00
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.		
8b. <b>Interest and dividends</b>	8b.     \$0.00	\$0.00
8c. <b>Family support payments that you, a non-filing spouse, or a dependent regularly receive</b>	8c.     \$0.00	\$0.00
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		
8d. <b>Unemployment compensation</b>	8d.     \$0.00	\$0.00
8e. <b>Social Security</b>	8e.     \$0.00	\$0.00
8f. <b>Other government assistance that you regularly receive</b>	8f.     \$0.00	\$0.00
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		
Specify: _____		
8g. <b>Pension or retirement income</b>	8g.     \$0.00	\$0.00
8h. <b>Other monthly income.</b> Specify: <u>Bonus from Sales</u>	8h. + \$500.00	+ \$0.00
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.     \$500.00	\$0.00
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.     \$12,330.00	+ \$1,450.00 = \$13,780.00
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b>		
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.		
Specify: _____	11. + \$0.00	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies		12.     \$13,780.00
		Combined monthly income
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1	<u>Timothy</u>	<u>Luke</u>	<u>George</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Southern District of Texas</u>		
Case number (if known)			

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:  
 \_\_\_\_\_

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Child \_\_\_\_\_

Dependent's age

2 \_\_\_\_\_

Does dependent live with you?

No.  Yes.

\_\_\_\_\_

No.  Yes.

\_\_\_\_\_

No.  Yes.

\_\_\_\_\_

No.  Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \_\_\_\_\_ \$3,508.16

If not included in line 4:

- 4a. Real estate taxes \_\_\_\_\_ \$0.00  
 4b. Property, homeowner's, or renter's insurance \_\_\_\_\_ \$0.00  
 4c. Home maintenance, repair, and upkeep expenses \_\_\_\_\_ \$300.00  
 4d. Homeowner's association or condominium dues \_\_\_\_\_ \$0.00

Debtor 1

<u>Timothy</u>	<u>Luke</u>	<u>George</u>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

		<b>Your expenses</b>
5.	<b>Additional mortgage payments for your residence</b> , such as home equity loans	5. _____ \$0.00
6.	<b>Utilities:</b>	
6a.	Electricity, heat, natural gas	6a. _____ \$189.00
6b.	Water, sewer, garbage collection	6b. _____ \$120.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. _____ \$419.00
6d.	Other. Specify: _____	6d. _____ \$0.00
7.	<b>Food and housekeeping supplies</b>	7. _____ \$2,100.00
8.	<b>Childcare and children's education costs</b>	8. _____ \$1,040.00
9.	<b>Clothing, laundry, and dry cleaning</b>	9. _____ \$350.00
10.	<b>Personal care products and services</b>	10. _____ \$250.00
11.	<b>Medical and dental expenses</b>	11. _____ \$250.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. _____ \$250.00
13.	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. _____ \$100.00
14.	<b>Charitable contributions and religious donations</b>	14. _____ \$200.00
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. _____ \$72.00
15b.	Health insurance	15b. _____ \$0.00
15c.	Vehicle insurance	15c. _____ \$225.00
15d.	Other insurance. Specify: _____	15d. _____ \$0.00
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. _____ \$0.00
17.	<b>Installment or lease payments:</b>	
17a.	Car payments for Vehicle 1	17a. _____ \$874.00
17b.	Car payments for Vehicle 2	17b. _____ \$649.00
17c.	Other. Specify: _____ Solar Panel	17c. _____ \$106.24
17d.	Other. Specify: _____ Generator	17d. _____ \$170.00
18.	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. _____ \$1,572.00
19.	<b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. _____ \$0.00
20.	<b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>	
20a.	Mortgages on other property	20a. _____ \$0.00
20b.	Real estate taxes	20b. _____ \$0.00
20c.	Property, homeowner's, or renter's insurance	20c. _____ \$0.00
20d.	Maintenance, repair, and upkeep expenses	20d. _____ \$0.00
20e.	Homeowner's association or condominium dues	20e. _____ \$0.00

Debtor 1

<b>Timothy</b>	<b>Luke</b>	<b>George</b>
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

21. Other. Specify: _____	21. + _____ \$0.00
22. Calculate your monthly expenses.	
22a. Add lines 4 through 21.	22a. _____ \$12,744.40
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b. _____ \$0.00
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. _____ \$12,744.40
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. _____ \$13,780.00
23b. Copy your monthly expenses from line 22c above.	23b. - _____ \$12,744.40
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. _____ \$1,035.60
24. Do you expect an increase or decrease in your expenses within the year after you file this form?	
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	
<input checked="" type="checkbox"/> No.	None
<input type="checkbox"/> Yes.	